4. Calculate gross income. Add line 2 + line 3.

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Desc Main
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Debtor 1		entify your case:		
•	Shackarah	S.	Vera	
	First Name	Middle Name	Last Name	Check if this is:
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	_
United States Bank			IST. OF PENNSYLVANIA	☐ A supplement showing postpetition
Case number	20-10823			chapter 13 income as of the following date
(if known)				MM / DD / YYYY
Official Form 10	<u> 160</u>			
Schedule I: Yo	our Income	e		12/1
include information a about your spouse. I your name and case	about your spool If more space is number (if kno	use. If you are separ s needed, attach a se wn). Answer every q	ated and your spouse is not filing parate sheet to this form. On the	nd your spouse is living with you, ng with you, do not include information ne top of any additional pages, write
	ribe Employı	nent		
 Fill in your employed information. 	oyment		Debtor 1	Debtor 2 or non-filing spouse
If you have more job, attach a sepa	_	Employment status	√ Employed	☐ Employed
with information a	about		☐ Not employed	☐ Not employed
additional employ	rers.	Occupation	Teacher	
Include part-time, or self-employed		imployer's name	School District of Philadelp	phia
Occupation may i student or homen	_	Employer's address	N	N. J. G.
applies.			Number Street Philadelphia, PA	Number Street
			City State Zip	p Code City State Zip Code
			nere? 5 months	
	н	low long employed th		
Port 2: Civo I				
	Details Abou	ıt Monthly Incom	e	
Estimate monthly inc	Details Abou	ut Monthly Incom	e	r any line, write \$0 in the space. Include your
Estimate monthly incomon-filing spouse unless fyou or your non-filing	Details Abou	at Monthly Incomedate you file this formated. The state of the state	e n. If you have nothing to report for	r any line, write \$0 in the space. Include your employers for that person on the lines below. If
Estimate monthly inc	Details Abou	at Monthly Incomedate you file this formated. The state of the state	e n. If you have nothing to report for	employers for that person on the lines below. If
Estimate monthly inconon-filing spouse unless of you or your non-filing you need more space, List monthly gro	Details Aboutome as of the case you are sepang spouse have reattach a separatess wages, sala	at Monthly Incomedate you file this formated. The state of the state	en. If you have nothing to report for er, combine the information for all for Debter 4.	employers for that person on the lines below. If tor 1 For Debtor 2 or

\$5,792.28

Debto	or 1 Shackarah S. Vera		Case num	nber (if known	1) 20-10	0823	
			For Debtor 1	For Debtor			
	Copy line 4 here	4.	\$5,792.28				
5 .	List all payroll deductions:						
	5a. Tax, Medicare, and Social Security deductions	5a.	\$1,149.50				
	5b. Mandatory contributions for retirement plans	5b.	\$519.70				
	5c. Voluntary contributions for retirement plans	5c.	\$0.00				
	5d. Required repayments of retirement fund loans	5d.	\$0.00				
	5e. Insurance	5e.	\$87.79				
	5f. Domestic support obligations	5f.	\$0.00				
	5g. Union dues	5g.	\$0.00				
	5h. Other deductions. Specify: See continuation sheet	5h. +	- \$305.70				
	Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f +	- 6.	\$2,062.69				
	5g + 5h. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$3,729.59				
	List all other income regularly received:	• •	Ψο,120.00				
	8a. Net income from rental property and from operating a	8a.	\$1,000.00				
	business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and						
	the total monthly net income.	O.L.	* 0.00				
	8b. Interest and dividends	8b.	\$0.00				
;	8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive	8c.	\$0.00				
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.						
;	8d. Unemployment compensation	8d.	\$0.00				
;	8e. Social Security	8e.	\$0.00				
	8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) or any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.						
	Specify:	8f.	\$0.00				
:	8g. Pension or retirement income	– 8g.	\$0.00				
	8h. Other monthly income.	og.					
	Specify:	8h. 4	\$0.00				
9.	Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9.	\$1,000.00				
	Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$4,729.59	F]=	\$4,729.59	
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.							
I	Do not include any amounts already included in lines 2-10 or amounts the	at are n	ot available to pay e	xpenses liste	d in Sche	dule J.	
;	Specify:				11. +	\$0.00	
	Add the amount in the last column of line 10 to the amount in line 11 income. Write that amount on the Summary of Your Assets and Liabilitie				12.	\$4,729.59	
	if it applies.			,		Combined monthly income	
13 .	Do you expect an increase or decrease within the year after you file	this fo	rm?				
	✓ No. None.						
	Yes. Explain:						

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Debtor 1		Shackarah S. Vera	Case nur	mber (if known) 20-10823	10823	
5h	Other P	Payroll Deductions (details)		For Debtor 1	For Debtor 2 or non-filing spouse	
		elphia Income Tax		\$219.53		
	Unemp	olyment Tax		\$4.05		
	PFT P	AC		\$6.50		
	PFT D	ues		\$57.74		
	Legal			\$17.88		
			Totals:	\$305.70		